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CONFIRMATION NO. 2802

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|--|---|-------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 10/071,962 | FILING OR 371(c) DATE 02/08/2002 RULE | CLASS 424 | GROUP ART UNIT 1647 | ATTORNEY DOCKET NO. 12279-127-999 | |
| APPLICANTS Baofu Ni, Houston, TX; Bill N.C. Sun, Bellaire, TX; Cecily R. Y. Sun, Bellaire, TX; | | | | | |
| ** CONTINUING DATA ***** This application is a CON of 09/303,155 04/30/1999 ABN which claims benefit of 60/083,575 04/30/1998 | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/09/2002 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u> </u> Examiner's Signature <u> </u> Initials | | STATE OR COUNTRY TX | SHEETS DRAWING 18 | TOTAL CLAIMS 30 | INDEPENDENT CLAIMS 5 |
| ADDRESS 26839 | | | | | |
| TITLE G-CSF receptor agonist antibodies and screening method therefor | | | | | |
| FILING FEE RECEIVED 956 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |